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## BIB DATA SHEET

CONFIRMATION NO. 3518

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/AU05/00107 01/28/2005  
 which claims benefit of 60/638,623 12/22/2004

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

AUSTRALIA 2004900362 01/28/2004  
 AUSTRALIA 2004906116 10/22/2004

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*\* SMALL ENTITY \*\***

07/02/2008

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	/DIVA RANADE/ Examiner's Signature	Initials		AUSTRALIA	11	36	5

**ADDRESS**

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**TITLE**

Retractable Syringe with Plunger Disabling System

<b>FILING FEE RECEIVED</b> 1115	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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